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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* YES/MR

*This application is a CIP of 09/159,814 09/23/1998 ABN*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NONE /MR

IF REQUIRED, FOREIGN FILING LICENSE GRANTED      \*\* SMALL ENTITY \*\*

\*\* 10/14/1999

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	ME	9	87	3
Verified and Acknowledged Examiner's Signature	<i>M. Chaitin</i> Initials				

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## TITLE

SAFE AND EFFECTIVE BIOFILM INHIBITORY COMPOUNDS AND HEALTH-RELATED USES THEREOF

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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